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INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	David WOLLAN
Title	Alcohol reduction in beverages
Art Unit	
Examiner Name	
Attorney Docket Number	3029-00089/US/NP

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

- Applicant/Inventor.  
 Assignee of record of the entire interest. See 37 CFR 3.71.  
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

WINE NETWORK TECHNOLOGY PTY LTD SIGNATURE of Applicant or Assignee of Record

Signature	David Wollan	Date	JAN 30 2006
Name	DAVID WOLLAN	Telephone	+61 2 14 948 184
Title and Company	DIRECTOR	WINE NETWORK TECHNOLOGY PTY LTD	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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